

ABSTRACT

An airway is adapted to lie in a cheek pathway in a user's mouth, traversing a path from a position outside a user's lips, between a user's otherwise closed lips, along a user's inner cheek wall outside a user's dental arches, curving dorsally of a user's rear-most teeth through a user's rear-jaw space, and reaching into airspace over a user's tongue in a user's rear-mouth cavity. The airway provides supplemental air to a user's rear-mouth cavity independently of a user's restricted nasal airways while a user's lips remain closed. The airway is adapted to be manufactured in-line and folded by a user to fit a particular user's cheek pathway. There are single-cheek and dual-cheek versions. Extensions of the airway can anchor it about a user's lips or ears. A cheek pocket anchor, formed of a resilient filament, is adapted for placement adjacent to a user's inner cheek wall within a user's cheek pocket and is user-adjustable to fit a particular user's cheek pocket. Spring-like action of the cheek pocket anchor dynamically maintains a bridge spanning across a user's inter occlusal space and lip opening as a user's jaws open and close. The cheek pocket anchor can be formed of a series of connected loops, the spans of which can be mutually adjusted to enable adjustment of the span of the whole cheek pocket anchor. The cheek pocket anchor is adapted to be joined to a work piece, such as a cheek path airway, to stabilize that work piece in a user's mouth. The cheek path airway, with or without the cheek pocket anchor, is adapted for use in combination with mandibular jaw-control and tongue-control devices which restrain a user's mandible and tongue from sagging into a user's throat airway, whereby the combination of airway and such jaw and tongue control devices simultaneously mitigates restrictions in a user's nasal and throat airways.